

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF CALIFORNIA

Amin Abdullah-Clarke # C-84681

FILED

Plaintiff  
vs.V.M. ALMAGER, Warden, et al.  
DefendantAPPLICATION TO PROCEED  
IN FORMA PAUPERIS  
BY A PRISONERCLERK US DISTRICT COURT  
SOUTHERN DISTRICT OF CALIFORNIA

2008 MAY 19 PM 3:29

by RW DEPUTY

CASE NUMBER: 08cv0882 DMS (WMC)

I, Amin Abdullah-Clarke, declare that I am the plaintiff in the above-entitled proceeding; that, in support of my request to proceed without prepayment of fees under 28 U.S.C. § 1915, I declare that I am unable to pay the fees for these proceedings or give security therefor and that I am entitled to the relief sought in the complaint.

of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated:  Yes  No (If "No" DO NOT USE THIS FORM)

If "Yes" state the place of your incarceration. Lancaster Prison

Have the institution fill out the Certificate portion of this application and attach a certified copy of your prison trust account statement showing transactions for the past six months.

2. Are you currently employed?  Yes  No

a. If the answer is "Yes" state the amount of your pay.

b. If the answer is "No" state the date of your last employment, the amount of your take-home salary or wages and pay period, and the name and address of your last employer.

3. In the past twelve months have you received any money from any of the following sources?

a. Business, profession or other self-employment  Yes  No

b. Rent payments, interest or dividends  Yes  No

c. Pensions, annuities or life insurance payments  Yes  No

d. Disability or workers compensation payments  Yes  No

e. Gifts or inheritances  Yes  No

f. Any other sources  Yes  No

If the answer to any of the above is "Yes" describe by that item each source of money and state the amount received and what you expect you will continue to receive. Please attach an additional sheet if necessary.

4. Do you have cash or checking or savings accounts?  Yes  No

If "Yes" state the total amount: \_\_\_\_\_

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property?  Yes  No

If "Yes" describe the property and state its value. \_\_\_\_\_

6. Do you have any other assets?  Yes  No

If "Yes" list the asset(s) and state the value of each asset listed.

7. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.

I hereby authorize the agency having custody of me to collect from my trust account and forward to the Clerk of the United States District Court payments in accordance with 28 U.S.C. § 1915(b)(2).

I declare under penalty of perjury that the above information is true and correct.

5/4/08

DATE

Amin Abdullah Clarke

SIGNATURE OF APPLICANT

**CERTIFICATE**

(To be completed by the institution of incarceration)

I certify that the applicant named herein has the sum of \$ 0 on account to his/her credit at

CSP Los Angeles County (name of institution). I further certify that during the past six months the applicant's average monthly balance was \$ 0. I further certify that during the past six months the average of monthly deposits to the applicant's account was \$ 0.

(Please attach a certified copy of the applicant's trust account statement showing transactions for the past six months.)

May 13, 2008

Matthew George A.C.F.

## CALIFORNIA DEPARTMENT OF CORRECTIONS

CALIF. STATE PRISON, LA COUNTY  
 INMATE TRUST ACCOUNTING SYSTEM  
 INMATE TRUST ACCOUNT STATEMENT



THE WITHIN INSTRUMENT IS A CORRECT  
 COPY OF THE TRUST ACCOUNT MAINTAINED  
 BY THIS OFFICE.

ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS  
 BY K. M. George ACF  
 TRUST OFFICE

FOR THE PERIOD: DEC. 13, 2007 THRU MAY 13, 2008

ACCOUNT NUMBER : C84681

BED/CELL NUMBER: F8010000000103L

ACCOUNT NAME : CLARKE, ANTHONY

ACCOUNT TYPE: I

PRIVILEGE GROUP: A

## TRUST ACCOUNT ACTIVITY

## \* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 10/22/90

CASE NUMBER: YA004838

COUNTY CODE: LA

FINE AMOUNT: \$ 100.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
12/13/2007		BEGINNING BALANCE		100.00
04/30/08	SU01	SYS TRNSF - POS	53.85-	46.15

## \* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 07/29/97

CASE NUMBER: YA032139

COUNTY CODE: LA

FINE AMOUNT: \$ 200.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
12/13/2007		BEGINNING BALANCE		7.01
04/30/08	SU01	SYS TRNSF - POS	7.01-	0.00

\* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT \*  
 \* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED. \*

&lt;&lt; NO ACCOUNT ACTIVITY FOR THIS PERIOD &gt;&gt;

## TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HALDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	0.00	0.00

CURRENT  
 AVAILABLE  
 BALANCE

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0.00

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